

6/99 (REV. 10/04)

SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY APPLICATION FOR EMPLOYMENT

Human Resources Department 10005 East Osborn Road Scottsdale, Arizona 85256 Phone: 480.850.8096 Fax: 480.850.8126

www.srpmicjobs.com

		DATE				
POSITION APPLYI	ON APPLYING FOR DEPARTMENT					
RATE OF PAY EXI	PECTED	DATE YOU CAN START				
PERSONAL IN	NFORMATION					
NAME	First	SOCIAI SOCIAI	SECURITY NUMB	ER		
PRESENT ADDRES	SS	City State	Zip			
MAILING ADDRES	SSStreet	City State	-			
PHONE NUMBER	()	MESSAC	•)		
IF NATIVE AMERI	ICAN, TRIBAL AFFILIATION _		TRIBAL EN	ROLLMENT N	O	
	RS OR OLDER Yes		MAIL			
	EMPLOYMENT, SUBMIT VERIF		LEGAL RIGHT TO V	VORK IN THE	US? Yes □ No □	
DO YOU HAVE A	VALID AZ DRIVER'S LICENS	E? Yes) No) Pleas	e specify			
	BEEN EMPLOYED BY SRPMI					
If Yes, When	Start Date End Date	Where	Department			
	IVES EMPLOYED BY SRPMIC					
EDUCATION	(Please Do Not Use "See	e Resume")				
SCHOOL LEVEL	NAME & LOCATION OF SCHOOL	GRADUATED	CERTIFICATE/ DIPLOMA	MAJOR/ DEGREE	GRADUATION YEAR	
HIGH SCHOOL/G.E.D.		Yes □ No □				
TRADE/ BUSINESS SCHOOL		Yes □ No □				
COLLEGE		Yes □ No □				
GRADUATE SCHOOL		Yes □ No □				

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GENERAL		
SUBJECTS OF SPECIAL STUDY OR RESEARC	CH WORK	
SPECIAL TRAINING OR SKILLS (To include G speed, knowledge of computers and software, etc.		
WHAT LANGUAGES OTHER THAN ENGLISH Speaking		riting
OTHER	w	nung
HAVE YOU EVER BEEN CONVICTED OF A FEL HAVE YOU EVER BEEN CONVICTED OF ANY TO NO If Yes, identify the crime for which you were conconvicted. Please provide any details you feel a consideration for employment, but will be considerany convictions may be considered as falsifying you	TYPE OF THEFT OR FRAUD? Evicted, the dates of the conviction and the locate are relevant. Conviction of a crime will not exert as part of an overall evaluation of your qual	automatically disqualify you from
MILITARY SERVICE RECORD HAVE YOU EVER SERVED IN THE US ARM	MED FORCES? Yes (No (
Date Entered	Date Separated	
Branch of Service	Serial Number	
Selective Service Number	Selective Service Class _	
DID YOU RECEIVE AN HONORABLE DISCHA	ARGE? Yes □ No □	
If No, please explain the circumstances		
ARE YOU A MEMBER OF A US RESERVE O	DR NATIONAL GUARD? Yes □ No □	
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⇒COMPLETE ALL INFORMATION; <u>DO NOT USE "SEE RESUME"</u>. ATTACH ADDITIONAL SHEET IF NEEDED.⇔

EMPLOYMENT HISTORY: (Start With The Most Recent Job And Work Back) ARE YOU EMPLOYED NOW? Yes □ No □ If Yes, may we contact your employer? Yes $\square No \square$ _____ Starting Salary _____ Ending Salary _____ JOB TITLE EMPLOYER Name Street SEPARATION DATE HIRE DATE Telephone Number _____ Number of employees supervised _____ Supervisor's Name _____ Title ____ Describe Duties Performed REASON FOR LEAVING ****************************** _____ Starting Salary _____ Ending Salary _____ EMPLOYER ______Name S Name Street City State SEPARATION DATE HIRE DATE Telephone Number _____ Number of employees supervised _____ Supervisor's Name ______ Title _____ Describe Duties Performed REASON FOR LEAVING ***************** Starting Salary _____ Ending Salary _____ JOB TITLE EMPLOYER Name Street SEPARATION DATE HIRE DATE Telephone Number ______ Number of employees supervised ______ Supervisor's Name _____ Title ____ Describe Duties Performed REASON FOR LEAVING ******************************* _____ Starting Salary _____ Ending Salary _____ JOB TITLE Name Street City State SEPARATION DATE EMPLOYER ______ Name S HIRE DATE Telephone Number of employees supervised _____ Supervisor's Name _____ Title ____ Describe Duties Performed REASON FOR LEAVING 6/99 (REV. 10/04)

NAME ADDRESS PHONE NO. OCCUPATION XEARS KNOWN	REFERENCES: List three	persons not related to you, wh	hom you have kno	own at least three ye	ears
3. HOW DID YOU HEAR ABOUT THE JOB VACANCY? □ Employment Agency □ Newspaper Ad □ Tribal Employee □ State Employment Office □ College Placement Service □ Walked In □ Friend □ Job Hotline □ Web Site □ Other ■ ATTACHINENTS REQUIRED DOCUMENTS TO BE ATTACHED. NOT ALL DOCUMENTS APPLY TO ALL POSITIONS. PLEASE NOTE 3 NICESSARY DOCUMENTS LISTED IN THE POSITION ANNOUNCEMENT □. CERTIFICATIONS (Any Educational Degrees, Diplomas, Transcripts, Training Certificates, Etc.) 2 MILITARY LD. CARD (If Applicable) 3. COPY OF DRIVER'S LICENSE AND DRIVING RECORD (Available through State Department of Transportation, M Vehicle Division) 4. ANY OTHER DOCUMENTATION AS SPECIFICALLY REQUIRED BY JOB RECRUITMENT BULLETIN CERTIFICATION AND AGREE THAT: 1. Any misrepresentation or omission of facts in my application or any attachments to my application will result in refuse employment or if employed, termination from employment. 2. It is my understanding that the SRPMIC will make a thorough investigation of my work, educational and personal history may verify all data given in my application, related papers or oral interviews. □ authorize such investigation and the giving receiving of any information requested by SRPMIC, and I release from liability any person giving or receiving of any information requested by SRPMIC, and I release from liability any person giving or receiving of any information requested by SRPMIC, and I release from liability any person giving or receiving any information. I understand that that falsification will result in refusal of employment or, if employed, termination from employment or and or facts testing, during my employment to determine if I am alcohol or drug free for the job I am responsible to perferiular to submit to such testing will result in termination. 4. I authorize any physician, including my personal physician, to release any information to SRPMIC expense, in addition to randor for cause testing, during my employment to determine if I am alcohol or drug free for the job I am responsible to perferi		-			YEARS
HOW DID YOU HEAR ABOUT THE JOB VACANCY? Employment Agency Newspaper Ad Tribal Employee	1.				
HOW DID YOU HEAR ABOUT THE JOB VACANCY? Employment Agency Newspaper Ad Tribal Employee State Employment Office College Placement Service Walked In Friend Job Hotline Web Site Other MTTACHINENTS REQUIRED DOCUMENTS TO BE ATTACHED. NOT ALL DOCUMENTS APPLY TO ALL POSITIONS. PLEASE NOTE 7 NECESSARY DOCUMENTS LISTED IN THE POSITION ANNOUNCEMENT 1. CERTIFICATIONS (Any Educational Degrees, Diplomas, Transcripts, Training Certificates, Etc.) 2. MILITARY LD. CARD (If Applicable) 3. COPY OF DRIVER'S LICENSE AND DRIVING RECORD (Available through State Department of Transportation, M Vehicle Division) 4. ANY OTHER DOCUMENTATION AS SPECIFICALLY REQUIRED BY JOB RECRUITMENT BULLETIN CERTIFICATION AND AGREEMENT: (Read Carefully before signing) 1. UNDERSTAND AND AGREEMENT: (Read Carefully before signing) 1. UNDERSTAND AND AGREEMENT: (Read Carefully before signing) 1. I sim y understanding that the SRPMIC will make a thorough investigation of my work, educational and personal history may verify all data given in my application, related papers or oral interviews. I authorize such investigation and the giving receiving of any information requested by SRPMIC, and I release from liability any persong giving or receiving any information. I understand that falisfication will result in refusal of employment or, if employed, termination from employment or, if employed, termination from employment or information. I understand that falisfication will result in refusal of employment or, if employed, termination from employment or information requested by SRPMIC and I release from liability any persong giving or receiving or any information. I understand that falisfication will result in refusal of employment or, if employed, termination from employment information. I understand that the falisfication will result in refusal of employment or, if employed, termination from employment information of continued employment in the reminated and agree that I will be required to take a pre-employment and continued employ	2.				
□ State Employment Office □ College Placement Service □ Walked In □ Friend □ Job Hotline □ Web Site □ Other ■ ### ATTACHMENTS REQUIRED DOCUMENTS TO BE ATTACHED. NOT ALL DOCUMENTS APPLY TO ALL POSITIONS. PLEASE NOTE OF STREET OF THE POSITION ANNOUNCEMENT 1. CERTIFICATIONS (*Any Educational Degrees, Diplomas, Transcripts, Training Certificates, Etc.) 2. MILITARY I.D. CARD (*If Applicable*) 3. COPY OF DRIVER'S LICENSE AND DRIVING RECORD (Available through State Department of Transportation, M Vehicle Division) 4. ANY OTHER DOCUMENTATION AS SPECIFICALLY REQUIRED BY JOB RECRUITMENT BULLETIN **CERTIFICATION AND AGREEMENT**. (*Read Carefully before signing*)** 1. UNDERSTAND AND AGREE THAT: 1. Any misrepresentation or omission of facts in my application or any attachments to my application will result in refuse employment or if employed, termination from employment. 2. It is my understanding that the SRPMIC will make a thorough investigation of my work, educational and personal history may verify all data given in my application, related papers or oral interviews. I authorize such investigation and the giving receiving of any information requested by SRPMIC, and I release from liability any person giving or receiving any information. I understand that flaisfication will result in refusal of employment or, if employed, termination from employment or cause testing, during my employment to determine if I am alcohol or drug free for the job I am responsible to perfor cause testing, during my employment to determine if I am alcohol or drug free for the job I am responsible to perfor a submit to such testing will result in termination. 4. I authorize any physician, including my personal physician, to release any information to SRPMIC and/or any departr thereof. I understand that those rules, regulations, policies and/or disciplinary procedures are not intended by SRPMIC to croan obligation of continued employment is an application or employment and continued employment is not being offered. I he understand that th	3.				
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C/00 (DEW 10/04)	Applicant Signature		Date		
C/00 (DEV 10/04)					
0/99 (KEV. 10/04)	6/99 (REV. 10/04)	4			